



**City of Henderson
Department of Utility Services**

AUTHORIZATION FOR BANK DRAFT PAYMENT

I/we authorize the City of Henderson-Utility Services and the financial institution named below to initiate entries to my/our checking account for the monthly water and sewer payment. This authority will remain in effect until I/we notify City of Henderson-Utility Services to cancel it. I understand it is my responsibility to notify the City of Henderson-Utility Services if I change banks or account numbers by mailing in such notification, along with a new voided check.

Within one to two billings, a message will appear on your bill notifying you that your payment will be deducted from your account on the bill due date. **Please continue to make payments until this message appears.**

Note: City of Henderson-Utility Services and the below named financial institution reserve the right to terminate this payment plan.

CHECK ONE:

☐ New Application ☐ Change ☐ Cancellation

PLEASE PRINT:

Date: _____

Utility Account Number: _____

Name: _____

Address: _____

Daytime or can-be-reached phone number: (____) ____ - _____

Name(s) on Bank Account: _____

Bank Name: _____

Type of Account: ☐ Checking

Bank Account Number to be debited: _____

☐ Savings

Routing Number: _____

Signature

Please attach VOIDED CHECK from the above account.

Note: Starter checks are not acceptable.

Return completed form & voided check to:

City of Henderson
Department of Utility Services
PO Box 95050 MSC 125
Henderson NV 89009-5050